
WISCONSIN MEDICAID

UPDATE

APRIL 28, 1997

UPDATE 97-15

TO:

Home Health Agencies
Personal Care Agencies

Home Health Coverage Determination Software Required Only for Dually Eligible Recipients

Use Medicaid coverage software only for dually eligible recipients

Effective immediately, Wisconsin Medicaid requires providers to use the Medicaid coverage determination software only for recipients who are dually eligible for Wisconsin Medicaid and Medicare. Providers no longer have to use the software for recipients who are *not* dually eligible.

Since July 1995, home health and personal care providers had to complete the coverage determination software for all recipients receiving Medicaid home care services.

The federal Health Care Financing Administration requires documentation that home care services paid by Wisconsin Medicaid are not covered by Medicare. The coverage determination software is acceptable documentation.

Continue to seek out payment from other payers first

Providers must continue to seek payment from other payers first, as appropriate (for example, private health insurance).

Keep a printed copy on file

You must continue to keep a printed copy of the software's determination on file and on the agency's premises for auditing purposes.

When Must I Use the Coverage Determination Software?

You must use the coverage determination software for a recipient who:

- Is dually eligible for Wisconsin Medicaid and Medicare when you initially seek payment from Wisconsin Medicaid.
- Has a change in condition or status that may make the recipient eligible for Medicare, and you seek payment from Wisconsin Medicaid.

Questions?

For questions on the coverage determination software, contact:

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